Highlights of the 2013 ASHA Membership Survey: SLPs

Demographics

Stratified random sampling was used in selecting the participants in this survey. The population from which the sample was drawn consisted of SLPs who were employed full- or part-time and who lived in the United States. The sample was stratified by type of facility so that SLPs who worked in facilities that had smaller number of SLPs, such as colleges and universities, would be adequately represented.

Among the respondents to the survey, 97% were female. Additionally, 71% were employed full-time, 85% were clinical service providers, 56% worked in schools, and 12% owned a private practice. The median number of years of experience was 16; the mean was 18 years. More SLPs worked in the south (33%) than in other regions of the country (Qs. 5, 15-20).

ASHA Services and Programs

Overall, 18% said that ASHA was doing an excellent job serving its members. An additional 61% rated ASHA as doing a good job (Q. 1).

Thirty-four percent of the SLPs said that they use information under ASHA’s state-by-state section of the website less than once a month (Q. 2).

Professional Development

SLPs preferred local in-person conferences for receiving professional development (76%). This varied by type of facility with SLPs in schools (80%) being more likely than those in other facilities to select it. Travel to in-person conferences and online self-study were distant second choices with 39% of SLPs choosing them (Q. 3).

Online Surveys

SLPs preferred completing electronic surveys on a computer (83%) rather than on a tablet (26%) or smartphone (19%; Q. 4).
Support Personnel

The median number of support personnel reported by SLPs was 0, and the mean was 1 (Q. 6).

After reading a short description of ASHA’s Associate’s Program, respondents were asked to use a scale of 1 to 5 to describe how likely they were to recommend it. More SLPs selected the middle of the scale than any other response (31%); 15% selected the top choice of very likely (Q. 7).

SLPs who selected the bottom two numbers on the scale (i.e., the less-likely-to-recommend group) were asked to complete a follow-up question about why they would not encourage support personnel to join the ASHA associates program. Most (75%) said they did not have sufficient information to make a recommendation (Q. 8).

Cultural and Linguistic Diversity

SLPs used an interpreter or cultural broker (37%) more often than any other approach to address cultural and linguistic influences on communication. This response varied by type of facility from 70% of SLPs in hospitals to 25% in residential health care facilities selecting it. Other approaches that approximately one-quarter of SLPs used were modified assessment strategies/procedures (27%) and referral to bilingual service providers (24%; Q. 9).

Telepractice

Three percent of the SLPs currently deliver services via telepractice. The range was from 0% among those who worked in residential health care facilities to 12% in colleges and universities (Q. 10).

The total number of SLPs who responded to the follow-up question about the client populations served via telepractice was only 34. Of this small group, 41% use telepractice services to serve children at home, 30% serve children in schools, 21% serve adults at home or work, 15% serve adults in the military or via the VA, and 12% serve children or adults at satellite clinics or hospitals (Q. 11).

Programs and Resources

SLPs were to rate the importance of each of ten programs and resources and rate the job that ASHA does with each of them. Half of the SLPs were to rate on a scale of 1 to 4 and half 1 to 5. The bullets below each refer to the highest rating, i.e., 4 or 5 depending on which form the SLPs received (Q. 12).

The ranking of the three programs and resources that received the largest percentage of very important ratings was the same for both survey forms (i.e., 4 point or 5 point):
- 81% of SLPs with the 4 point scale and 74% with the 5 point scale gave certification the highest rating of importance.
- 71% of SLPs with the 4 point scale and 57% with the 5 point scale gave ethics the highest rating of importance.
- 55% of SLPs with the 4 point scale and 44% with the 5 point scale gave the ASHA website the highest rating of importance.

The ranking of the six programs and resources that received the largest percentage of excellent ratings of ASHA’s performance was the same for both survey forms (i.e., 4 point or 5 point):
- 64% of SLPs with the 4 point scale and 54% with the 5 point scale gave certification the highest possible performance rating.
- 59% of SLPs with the 4 point scale and 45% with the 5 point scale gave ethics the highest possible performance rating.
- 51% of SLPs with the 4 point scale and 40% with the 5 point scale gave The ASHA Leader the highest possible performance rating.
- 43% of SLPs with the 4 point scale and 37% with the 5 point scale gave the ASHA website the highest possible performance rating.
- 37% of SLPs with the 4 point scale and 31% with the 5 point scale gave ASHA CEU products the highest possible performance rating.
- 36% of SLPs with the 4 point scale and 29% with the 5 point scale gave Special Interest Groups (SIGs) the highest possible performance rating.

Ethics

Respondents were asked to select up to three options (from a list of 11) of ethics education areas for which they would like ASHA to offer CEU products.
- More than thirty percent selected employer/supervisor demands (38%) and patient/client documentation (37%).
- More than twenty percent selected reimbursement, coding, or billing issues (28%), use of support personnel for speech or audiology (26%), multicultural/bilingual issues (23%), and conflicts of interest (21%).
- More than ten percent selected supervision issues (19%) and legal and regulatory disclosures (18%).
- Few selected clinical fellowship issues (9%), identifying/reporting SLPs or audiologists who exhibit professionally inappropriate behavior (6%), and reporting incompetent ASHA members (6%; Q. 13).

Workforce

An open-ended question asked respondents to identify any scope of practice concerns they had that might impact their employment. For a list of responses, contact the Surveys and Analysis unit at data@asha.org (Q. 14).